



**TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION
DIVISION OF UNDERGROUND STORAGE TANKS**

HAZARD NOTIFICATION REPORT

In accordance with rule 1200-1-15-.06(4)(a), this form shall be printed, completed and submitted to the Division of Underground Storage Tanks within seventy-two (72) hours upon the discovery of impacted drinking water, petroleum vapors, free product, and/or other hazards. This form must be submitted by facsimile machine and the original form sent by mail to the appropriate environmental field office.

Date of Notification:	
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Facility Information

Facility ID #:	Facility Telephone # ()
Facility Name:	
Facility Address:	
State & Zip Code:	

Owner Information

Owner ID #:	Owner Telephone # ()
Owner Name:	
Owner Address:	
State & Zip Code:	

Corrective Action Contractor (CAC) Information

CAC ID #:	CAC Telephone # ()
CAC Name:	
CAC Address:	
State & Zip Code:	

Hazard Information

Hazard Address:

Hazard Location (check all that apply)

Residence:	Sanitary Sewer:	Surface Water:
Commercial Bldg:	Storm Sewer:	Observ./Mon. Well:
Other (describe):		

Type of Hazard (check all that apply)

Impacted Drinking Water:	Free Product:
Petroleum Vapors:	
Other (describe):	

Describe Abatement Measures Taken to Date

Signature Page

A signature page, as shown below shall be attached to the Hazard Notification Report Form. The page shall be signed by the owner/operator (or authorized representative within the organization) and, if applicable, a registered professional geologist under the Tennessee Geologist Act (*T.C.A. §62-36-101 et seq.*), or a registered professional engineer under the Tennessee Architects, Engineers, Landscape Architects, and Interior Designers Law and Rules (*T.C.A. §62-2-101 et seq.*).

We, the undersigned, certify under penalty of law, including but not limited to penalties for perjury, that the information contained in this report form and on any attachments, is true, accurate and complete to the best of our knowledge, information, and belief. We are aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for intentional violations.

Owner/Operator (Print name)

Signature

Date

Title (Print)

P.E. or P.G. (Print name)

Signature

Date

Tennessee Registration #

Note: Each of the above signatures shall be notarized separately with the following statement.

STATE OF _____

COUNTY OF _____

Sworn to and subscribed before me by _____ on this date _____

My commission expires _____

Notary Public (Print name)

Signature

Date

Stamp/Seal